Name of Institution **Francis Marion University**

Name of Program (include concentrations, options, and tracks)
Doctor of Nursing Practice (D.N.P.)
Program options: 1) Practitioner track (BSN to DNP) and 2) Practitioner track (MSN to DNP)

Program Designation

☐ Associate's Degree   ☐ Master's Degree

☐ Bachelor's Degree: 4 Year   ☐ Specialist

☐ Bachelor's Degree: 5 Year   ☐ Doctoral Degree: Research/Scholarship (e.g., Ph.D. and DMA)

X Doctoral Degree: Professional Practice (e.g., Ed.D., D.N.P., J.D., Pharm.D., and M.D.)

Does the program qualify for supplemental Palmetto Fellows and LIFE Scholarship awards?
☐ Yes

X No

Proposed Date of Implementation   **Fall 2018**   CIP Code **51.3818**

Delivery Site(s**) Francis Marion University, Florence South Carolina, 29502**

Delivery Mode

☐ Traditional/face-to-face*   **x** Distance Education
*select if less than 50% online   **X** 100% online

                                           ☐ Blended (more than 50% online)

                                           ☐ Other distance education

Program Contact Information (name, title, telephone number, and email address)
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Institutional Approvals and Dates of Approval
Nursing Program: September 15, 2015
University Graduate Council: September 7, 2016
University Senate: September 22, 2016
University Full Faculty: October, 13 2016
Board of Trustees: November 4, 2016

Background Information

State the nature and purpose of the proposed program, including target audience and centrality to institutional mission. (1500 characters)

The Francis Marion University (FMU) Doctor of Nursing Practice (DNP) program is designed to meet the needs of current and future Pee Dee region nursing students and to respond to the IOM's (2011) recommendation for seamless education. The program has two (2) pathways; 1) an MSN to DNP for Advanced Practice RNs (APRN) and 2) a BSN to DNP option for RNs to become Advanced Practice RNs.

The FMU DNP program meets recommendations of the American Academy of Colleges of Nursing (AACN, 2015). AACN published a position statement (2004) recommending APRNs to be educated at a doctoral level. AACN defines advanced nursing practice as nurses who provide direct care and indirect care such as nursing administration, executive leadership, health policy, informatics, and population health (AACN, 2015).

Since 2006, AACN has established curriculum criteria for the Doctor of Nursing Practice (DNP) degree, *The Essentials of Doctoral Education for Advanced Nursing Practice*. In addition, AACN voted to approve that all APRN master's programs advance to the DNP educational level by 2015 (Auerbach et al., 2014). There are 289 DNP programs in the US and another 100 in development (AACN, 2015, p. 1). South Carolina has three (3) established DNP programs, the Medical University of South Carolina (MUSC), University of South Carolina (USC), Columbia, and Clemson University.

The target audience is RNs and APRNs from the Pee Dee region. To date, FMU has successfully graduated 64 APRNs and almost 600 RNs and 90% have remained in and are employed in the Pee Dee region. Adding a DNP program to the existing FMU successful nursing programs is a natural progression to ensure our healthcare providers meet the current national criteria. (Characters 1,450)

List the program objectives. (2000 characters)

Mission
The Francis Marion University (FMU) Doctor of Nursing Practice (DNP) degree prepares nurses to work in clinical practice roles that apply evidence-based practice to patients, systems, and populations in order to improve health with a focus on rural populations.

Program Student Learning Outcomes
1. Applies nursing and interprofessional scientific and theoretical knowledge to improve healthcare services to patients, families, and populations with an emphasis on rural populations.
2. Uses leadership skills and competencies in healthcare systems to improve healthcare services to patients, families, and populations with an emphasis on rural populations.
3. Synthesizes and disseminates evidence-based practices to improve healthcare services to patients, families, and populations with an emphasis on rural populations.
4. Utilizes information systems and technology to improve healthcare services to patients, families, and populations with an emphasis on rural populations.
5. Demonstrates leadership and advocacy in facilitating positive healthcare change to improve healthcare services to patients, families, and populations with an emphasis on rural populations.
6. Employs effective interprofessional communication and collaboration to improve healthcare services to patients, families, and populations with an emphasis on rural populations.
7. Implements system changes that advocate healthcare prevention to improve healthcare services to patients, families, and populations with an emphasis on rural populations.
8. Delivers advanced practice care in complex situations and systems to improve healthcare services to patients, families, and populations with an emphasis on rural populations (Adapted from the AACN *Essentials of Doctoral Education for Advanced Nursing Practice*, 2006).

The DNP program outcomes will include ongoing analysis of the following data:
1. Student completion rates [Benchmark 60% within five (5) years]
2. Graduate satisfaction rate (Benchmark 80% overall satisfaction)
3. Job placement rates (Benchmark 90% with 80% in the Pee Dee region)
4. Job placement rates in rural areas (Benchmark 75% of graduates with documented employment)
5. Employer satisfaction rate (Benchmark 90% overall satisfaction) (Characters 1,939)

Assessment of Need

Provide an assessment of the need for the program for the institution, the state, the region, and beyond, if applicable. (1500 characters)

The Pee Dee is a 12-county region in the northeast corner of SC (Office of Healthcare Workforce Analysis and Planning, 2016). The Pee Dee region is largely rural with high unemployment, low educational attainment, high poverty, and a high minority population. Nine out of the twelve counties are rural with the exception of Florence, Horry, and Sumter but large portions of those counties are also rural.
 Pee Dee residents have the highest health disparities with increased diabetes, obesity, limited activity, increased use of assistive devices, and asthma. The Pee Dee region also has a lack of primary care practitioners. There are 8.2 primary care physicians per 10,000 population. The average number of primary care physicians per 10,000 population for the state of SC is 10. The other three Department of Health Education Consortium (DHEC) areas fair better with primary care physician providers (Lowcountry 11/10,000; Midlands 21.6 /10,000; Upstate 11.4/10,000).
 The Pee Dee region has 264 Nurse Practitioners (NPs) compared to 508 in the Lowcountry, 599 in the Midlands, and 663 in the Upstate. Therefore, 13% of all of SC NPs are caring for 29% of the state's total population. The Pee Dee region has the greatest need in SC for educational systems to promote primary care, and the future of advanced practice nursing is the DNP degree (SC Health Professions Data Book, 2016).
 Additionally, FMU hires faculty with the terminal degree of Doctor of Nursing Practice (DNP). There is an overwhelming national and state nursing faculty shortage. According to a study released by AACN (2016), there are 1,328 national faculty vacancies (AACN, 2016). (Characters 1,497)

Employment Opportunities

Is specific employment/workforce data available to support the proposed program?

xYes

☐No

If yes, complete the table and the component that follows the table on page 4. If no, complete the single narrative response component on page 5 beginning with "Provide supporting evidence."

Employment Opportunities			
Occupation	Expected Number of Jobs	Employment Projection	Data Source
Nurse Anesthetists, Nurse Midwives, and Nurse Practitioners	170,400	• Job outlook for 2014-2024- 31% growth • Employment change 53,400	US Department of Labor Statistics https://www.bls.gov/ooh/healthcare/nurse-anesthetists-nurse-midwives-and-nurse-practitioners.htm
Higher Ed jobs	Over 900 nursing faculty jobs posted 12-16-16	Nursing faculty shortages are predicted to continue due to the increasing retirement of current faculty.	Faculty age continues to climb, narrowing the number of productive years nurse educators can teach. According to AACN's report on *2013-2014 Salaries of Instructional and Administrative Nursing Faculty in Baccalaureate and Graduate Programs in Nursing*, the average ages of doctorally-prepared nurse faculty holding the ranks of professor, associate professor, and assistant professor were 61.6, 57.6, and 51.4 years, respectively.

Provide additional information regarding anticipated employment opportunities for graduates.
(1000 characters)

Advanced practice registered nurses with a Doctor of Nursing Practice degree are being employed in multiple healthcare and educational environments. DNP-prepared graduates are primary care providers in the acute and non-acute clinical areas. DNP-prepared graduates are nurse leaders and executives in clinical and non-clinical environments. DNP-prepared graduates are assuming nursing faculty roles to assist with the severe nursing faculty shortage. At FMU the majority (64%) of the nursing faculty hold a DNP degree and this is similar for many comprehensive academic institutions that offer a nursing degree. (Characters 510)

Provide supporting evidence of anticipated employment opportunities for graduates, including a statement that clearly articulates what the program prepares graduates to do, any documented citations that suggests a correlation between this program and future employment, and other relevant information. Please cite specific resources, as appropriate. (3000 characters)

Note: Only complete this if the Employment Opportunities table and the section that follows the table on page 4 have not previously been completed.
Will the proposed program impact any existing degree programs and services at the institution (e.g., course offerings or enrollment)?

xYes

☐No

If yes, explain. (500 characters)

The proposed program will impact the number of MSN /FNP students. Some BSN graduates may opt for seamless education from BSN to DNP. The anticipation is that other students may opt to complete their education in stages and enroll in the MSN/FNP program option and then continue on in the DNP option at a later date or upon MSN completion. (Characters 279)

List of Similar Programs in South Carolina

Program Name	Institution	Similarities	Differences
Doctor of Nursing Practice Program	University of South Carolina, Columbia	Both USC and FMU will offer a BSN to DNP and MSN to DNP options. Both USC and FMU offer MSN/FNP options.	USC offers the following DNP options that FMU does not offer: Adult Gerontology Acute Care Nurse Practitioner (AGACNP) Family Psychiatric Mental Health Nurse Practitioner (PMHNP) Executive Leadership
Doctor of Nursing Practice	Medical University of South Carolina	Both MUSC and FMU will offer a BSN to DNP and MSN to DNP options. Both MUSC and FMU offer MSN/FNP options.	MUSC offers the following DNP options that FMU does not offer: Adult-Gerontology, Pediatric Psychiatric Mental Health:
Doctor of Nursing Practice	Clemson University	Both Clemson and FMU will offers a post-masters DNP option.	FMU offers the following option that Clemson does not offer: MSN/FNP

Description of the Program

Projected Enrollment of BS(N) to DNP						
Year	Fall		Spring		Summer	
	Headcount	Credit Hours	Headcount	Credit Hours	Headcount	Credit Hours
2018	2	18	2	18	2	14
2019	5	43	5	45	5	37
2020	9	76	9	75	9	58
2021	12	101	12	99	12	76
2022	15	126	15	123	15	94

Projected Enrollment of MSN to DNP						
Year	Fall		Spring		Summer	
	Headcount	Credit Hours	Headcount	Credit Hours	Headcount	Credit Hours
2018	10	90	10	90	10	90
2019	15	135	15	135	15	135
2020	15	135	15	135	15	135
2021	15	135	15	135	15	135
2022	15	135	15	135	15	135

TOTAL Projected Enrollment						
Year	Fall		Spring		Summer	
	Headcount	Credit Hours	Headcount	Credit Hours	Headcount	Credit Hours
2018	12	108	12	108	12	104
2019	20	178	20	180	20	172
2020	24	211	24	210	24	193
2021	27	236	27	234	27	211
2022	30	261	30	258	30	229

Besides the general institutional admission requirements, are there any separate or additional admission requirements for the proposed program?

X Yes

☐No

If yes, explain. (1000 characters)

BSN to DNP Graduate Program Admission Criteria
To be considered for admission, the applicant must submit the following materials to the School of Health Sciences:
1. graduate application
2. official academic transcripts from all colleges and universities attended that indicates the applicant has completed a Bachelor of Science (Nursing) degree with a cumulative G.P.A. of 3.0 or greater
3. copy of resume or curriculum vitae
4. copy of current RN license or final BS(N) transcript
5. three (3) letters of professional recommendation
6. admission essay (approximately 500 words) in which the applicant must address the following:
    1. Identify an area of interest
    2. Describe why you are interested in this area.
    3. Discuss a topic that is relevant to the current healthcare environment.
    4. Discuss how the topic can become an evidenced-based practice leadership project.
    5. Synthesize how the issue is relevant to the role of the DNP-prepared nurse

Additional MSN to DNP Graduate Program Admission Criteria
1. Master of Science (Nursing) degree with a cumulative G.P.A. of 3.0 or greater
2. A valid, unencumbered APRN (advanced practice registered nurse) license
(Characters 993)

Are there any special articulation agreements for the proposed program?
    X Yes

    ☐No

If yes, identify. (1000 characters)
       The program requires the completion of practicum (clinical) learning experiences. Francis Marion University has adequate affiliation agreements with clinical agencies to accomplish the DNP student learning outcomes. The most often used clinical learning sites are within the organizations of McLeod Regional Medical Center and Carolinas Hospital System. FMU has already collected a cadre of primary care clinical sites in rural areas that are used by the MSN/FNP students that will be applicable to the DNP students as well. All affiliation agreements are up-to-date and available upon request. (Characters 494)

Curriculum

Fulltime Option for APRNs to DNP

Curriculum by Year					
Course Name	**Credit Hours**	**Course Name**	**Credit Hours**	**Course Name**	**Credit Hours**
Year 1					
Fall		**Spring**		**Summer**	
DNP 800 Doctoral Knowledge Development	3	DNP 803 The Role of Technology and Interprofessional Collaboration	3	DNP 806 Scholarly Writing and Grant Development	3
DNP 801 Doctoral Research and Epidemiological Evidence-based Practice	3	DNP 804 Ethics and Quality Improvement (90 clinical hours)	3	DNP 807 Capstone 1 (135 clinical hours)	3
DNP 802 Doctoral Health Policy and Leadership (45 clinical hours)	3	DNP 805 Project Development [135 hours (95 clinical hours & 40 project hours)]	3	DNP 808 Capstone 2 (135 clinical hours)	3
Total Semester Hours	9	Total Semester Hours	9	Total Semester Hours	9

Total Credit Hours Required 27

Fulltime Option for BS(N) to APRN/DNP

Course Name	Credit Hours	Course Name	Credit Hours	Course Name	Credit Hours
Curriculum by Year					
Year 1					
Fall		**Spring**		**Summer**	
APRN 602 Advanced Pharmacology	3	APRN 502 Biostatistics	3	APRN 603 Advanced Physical Assessment and Health Promotion (45 laboratory hours)	4
DNP 800 Doctoral Knowledge Development	3	APRN 601 Advanced Pathophysiology	3	DNP 801 Doctoral Research and Epidemiological Evidence-based Practice	3
DNP 802 Doctoral Health Policy and Leadership (45 clinical hours)	3	DNP 803 The Role of Technology and Interprofessional Collaboration	3		
Total Semester Hours	9	Total Semester Hours	9	Total Semester Hours	7
Year 2					
Fall		**Spring**		**Summer**	
APRN 507 Patient Education and Advocacy	3	APRN 702 Primary Care of Infants, Children and Adolescents (90 clinical hours)	4	DNP 806 Scholarly Writing and Grant Development	3
APRN 701 Primary Care of Adults (135 clinical hours)	5	APRN 703 Primary Care of Women (45 clinical hours)	2	APRN 704 Primary Care of Geriatric Patients (45 clinical hours)	2
		DNP 804 Ethics and Quality Improvement (90 clinical hours)	3	APRN 707 Clinical Decision-making and Ethics	3
Total Semester Hours	8	Total Semester Hours	9	Total Semester Hours	8
Year 3					
Fall		**Spring**		**Summer**	
APRN 705 Internship I (135 clinical hours)	4	DNP 805 Project Development [135 hours (95 clinical hours & 40 project hours)]	3	DNP 808 Capstone 2 (135 clinical hours)	3
APRN 706 Internship II (135 clinical hours)	4	DNP 807 Capstone 1 (135 clinical hours)	3		
Total Semester Hours	8	Total Semester Hours	6	Total Semester Hours	3

Total Credit Hours Required 67

Course Descriptions for New Courses

Course Name	Description
DNP 800 Doctoral Knowledge Development (3)	This course introduces the graduate student to contemporary nursing knowledge, including theoretical models with particular attention to middle range and practice theories. Discussions related to the application of the nursing metaparadigms, philosophies, and theories will concentrate on linking those discipline specific foundational concepts to advanced practice.
DNP 801 Doctoral Research and Epidemiological Evidence-based Practice (3)	This course prepares graduate students to appraise all levels of nursing and healthcare research and apply evidence-based in an advanced practice role. Statistical analysis of evidence will be discussed to ascertain the applicability to specific populations. In addition, knowledge about human rights in research will be an expected graduate student outcome.
DNP 802 Doctoral Health Policy and Leadership (3:2-3) (45 clinical hours)	This course focuses on public policy in healthcare and the role of the doctorally-prepared nurse as a leader in policy development. Graduate students develop strategies to assume leadership roles and effect patient care outcomes.
DNP 803 The Role of Technology and Interprofessional Collaboration (3)	This course focuses on using technology and interprofessional collaboration to arrive at quality patient outcomes. Documentation systems and standards will be discussed along with interprofessional communication techniques.
DNP 804 Ethics and Quality Improvement (3:1-6) (90 clinical hours)	This course focuses on quality patient outcomes and quality improvement. The course will emphasize ethical healthcare practices that are value-based. This course includes 90 clinical hours to explore a healthcare project that would benefit from a well-designed quality improvement protocol.
DNP 805 Project Development (3:0-9) [135 hours (95 clinical hours & 40 project hours)]	This course assists the graduate student to focus attention on a specific quality improvement project that can be fully investigated and developed into a capstone project. This course includes clinical and project hours to prepare the graduate student to fully understand the delivery of quality patient care in the advanced practice role.
DNP 806 Scholarly Writing and Grant Development (3)	This course develops skills for students to engage in clinical scholarship including manuscript development and grant writing. In addition, discussion and information about effective presentation and public speaking will be explored.
DNP 807 Capstone 1 (3:0-9) (135 clinical hours)	This course focuses of the planning of an evidence-based practice, quality improvement project. This course assists the graduate student to develop a project that will make a significant improvement in patient care. In addition, the graduate students will begin to formalize a professional portfolio.
DNP 808 Capstone 2 (3:0-9) (135 clinical hours)	(Prerequisite DNP 807) This course focuses on the implementation and the evaluation of an evidence-based practice, quality improvement project. The culmination of this course will contain disseminated project results. In addition, the graduate student will complete a professional portfolio.
DNP 809 Advanced Assessment and Pharmacological Effects on the Pathophysiology of Body Systems (3)	This course discusses advanced physical assessment, physiological, and the pharmacological effects on specific body systems. Competencies for advanced practice nurses will be discussed, and patient manifestations will be linked to evidence-based interventions.

DNP 845 Independent Study (3:0-9) (135 clinical hours)	This elective course is an independent study which can be used to complete graduate projects, increase practice hours, or specialize in a clinical specialty. Graduate students will work closely with a faculty facilitator to develop learning objectives and evaluate progress. This course can be taken twice.

Faculty

Faculty and Administrative Personnel				
Rank	Full- or Part-time	Courses Taught or To be Taught, Including Term, Course Number & Title, Credit Hours	Academic Degrees and Coursework Relevant to Courses Taught, Including Institution and Major	Other Qualifications and Comments (i.e., explain role and/or changes in assignment)
Assistant Professor (Supervisor)	Full-time	Doctoral Health Policy and Leadership	BSN 1989- Medical University of South Carolina MSN/FNP –1993- University of South Carolina DNP 2009- University of South Carolina	This faculty member is currently the director of the MSN/FNP program option.
Assistant Professor	Full-time	DNP 803 The Role of Technology and Interprofessional Collaboration DNP 805 Project Development	RN component of MSN/FNP Program 1998- Vanderbilt University DNP 2014- MUSC	This faculty member will no longer teach Health Assessment in the undergraduate program in order to teach at the doctoral level.
Assistant Professor	Full-time	DNP Capstone I DNP Capstone 2	BSN 1992- California State University MSN/PNP 1997- Fresno State University MSN/FNP 1995- Fresno State University DNP 2003- Rush University	This faculty member will no longer teach Nursing Fundamentals in the undergraduate program in order to teach at the doctoral level.
Assistant Professor	Full-time	DNP 804 Ethics and Quality Improvement DNP 809 Advanced Assessment and Pharmacological Effects on the Pathophysiology of Body Systems	BSN 2004- MUSC MSN/FNP 2012- MUSC DNP 2012- MUSC	This faculty member will no longer teach in the undergraduate program option.

Professor	Full-time	DNP 800 Doctoral Knowledge Development DNP 806 Scholarly Writing and Grant Development	BSN 1981 Felician College MS 1983 Columbia University, NY PhD 2006 Widener University	This faculty is the Dean of Health Sciences (was a DrNP Track Coordinator at Drexel University, Philadelphia 2007-2010) Wittmann-Price, R. A., Waite, R. & Woda, D. H. (2011). The role of the educator. In *Role development for doctoral advanced nursing practice* (Dreher, M. & Glasgow, M. E. S., Eds.). NYC: Springer Publishing. *(AJN Book of the Year Award for 2011 and 5-Star Review from Doody's scoring a perfect 100 score. Only 8% of medical books reviewed by Doody's receive this highest rating).* Wittmann-Price, R. A. (2012). *Fast facts for developing a nursing academic portfolio.* NYC: Springer Publishing.
Assistant Professor	Full-time	DNP 801 Doctoral Research and Epidemiological Evidence-based Practice	BSN Clemson University PhD 2016 MUSC	

Note: Individuals should be listed with program supervisor positions listed first. Identify any new faculty with an asterisk next to their rank.

Total FTE needed to support the proposed program (i.e., the total FTE devoted just to the new program for all faculty, staff, and program administrators):

Faculty   Staff   Administration
1

Faculty /Administrative Personnel Changes

Provide a brief explanation of any additional institutional changes in faculty and/or administrative assignment that may result from implementing the proposed program. (1000 characters)

The first year fall semester has nine (9) DNP teaching credit hours. Our current DNP-prepared faculty will have schedules altered to incorporate those classes by hiring adjunct faculty to oversee MSN student practicums. The current Director for the MSN/FNP program option will assume the role of DNP Director. Summer course offerings are done on a volunteer bases at FMU and to date have not been a problem to fill.

Library and Learning Resources

Identify current library/learning collections, resources, and services necessary to support the proposed program and any additional library resources needed. (1000 characters)

The James A. Rogers University Library is easy to access online at http://libguides.fmarion.edu/offcampus. The nursing program has a library liaison, Faith Keller, who is available to assist graduate nursing students with library services. The FMU library has three main vendors (Gale, EBSCO, and ScienceDirect), and two partnerships (DISCUS and PASCAL) which provide access to over 150 databases, including CINAHL, MEDLINE, and UpToDate. (Ms. Faith Keller, Nursing Liaison Librarian, personal communication, October 18, 2016). The FMU library resources are accessible from off-campus locations with the FMU ID card. These resources ensure that students can access the most up-to-date evidence. Dr. Tracy George, Assistant Professor of Nursing, is the library representative for the nursing program. (Characters 687)

Student Support Services

Identify academic support services needed for the proposed program and any additional estimated costs associated with these services. (500 characters)

- Computer and technology services
- SwampFox Emergency alert
- Writing Center available online
- Counseling and Testing provides professional counselors
- Student Health Services provides health care.
- University Center provides students with athletic facilities.
- Local police station is located one block from the Carter Center for Health Sciences (CCHS) building.
- FMU Patriot Bookstore
- Financial services
- Faculty advisement is provided to each graduate nursing learner.
- Faculty tutoring via email or by Skype.
- Simulation and skills laboratory hours (Characters 479)

Physical Resources

Identify any new instructional equipment needed for the proposed program. (500 characters)

FMU's new Carter Center for Health Science building (CCHS) in downtown Florence is located near McLeod Regional Medical Center. CCHS has over 52,000 square feet and currently houses the following programs: Family Nurse Practitioner, Physician Assistants, Clinical Psychology, Speech Pathology, and third and fourth year medical students from the University of South Carolina/Greenville. The building will also house the DNP program faculty and any DNP students who wish to be advised in person. The CCHS also has a 150-seat auditorium to accommodate interprofessional and community conferences. (Characters 479)

Will any extraordinary physical facilities be needed to support the proposed program?
☐Yes

X No

Identify the physical facilities needed to support the program and the institution's plan for meeting the requirements, including new facilities or modifications to existing facilities. (1000 characters)

CCHS has ample office space to comfortably house the one full-time or part-time faculty members as needed for the DNP program. The third floor of the CCHS building has nineteen offices (19) and two (2) reception areas in the academic wing. Currently there is plenty of space to accommodate the DNP program and future healthcare program development. (Characters 379)

Financial Support

Estimated New Costs by Year						
Category	**1st**	**2nd**	**3rd**	**4th**	**5th**	**Total**
Program Administration	0	0	0	0	0	0
Faculty and Staff Salaries	110,000	112,200	114,444	116,733	119,067	572,444
Graduate Assistants	0	0	0	0	0	0
Equipment	0	0	0	0	0	0
Facilities	0	0	0	0	0	0
Supplies and Materials	5,000	5,500	6,000	6,500	7,000	30,000
Library Resources	0	0	0	0	0	0
Other*	0	0	0	0	0	0
Total	115,000	117,700	120,444	123,233	126,067	602,444
Sources of Financing						
Category	**1st**	**2nd**	**3rd**	**4th**	**5th**	**Total**
Tuition Funding	250,688	415,202	481,008	533,495	585,983	2,266,376
Program-Specific Fees	0	0	0	0	0	
State Funding (i.e., Special State Appropriation)*	0	0	0	0	0	0
Reallocation of Existing Funds*	0	0	0	0	0	0
Federal Funding*	0	0	0	0	0	0
Other Funding*	0	0	0	0	0	0
Total	250,688	415,202	481,008	533,495	585,983	2,266,376
Net Total (i.e., Sources of Financing Minus Estimated New Costs)	135,688	297,502	360,564	410,262	459,916	1,663.932

*Provide an explanation for these costs and sources of financing in the budget justification.

Budget Justification

Provide a brief explanation for the other new costs and any special sources of financing (state funding, reallocation of existing funds, federal funding, or other funding) identified in the Financial Support table. (1000 characters)

Note: Institutions need to complete this budget justification *only* if any other new costs, state funding, reallocation of existing funds, federal funding, or other funding are included in the Financial Support table.

Evaluation and Assessment

Programmatic Assessment: Provide an outline of how the proposed program will be evaluated, including any plans to track employment. Identify assessment tools or software used in the evaluation. Explain how assessment data will be used. (3000 characters)

Three (3) separate components of the DNP program will be evaluated in order to collect a variety of data to inform decisions for performance improvement. First, every course has a set of student learning outcomes (SLOs) which are leveled and lead to the end-of-program SLOs. The end-of-program SLOs are congruent with the mission of the DNP program and FMU. Course SLOs are evaluated after each course is taught and recorded on a course report form. The course report form is completed by the teaching faculty and analyzes the following course attributes; congruency of the course description between the syllabus and the published University Catalog, it assesses the amount of course hours that are taught by guest lecturers, key concepts taught, the method of assessment(s) used to verify the attainment of each course SLO, how the concepts of diversity and interprofessional collaboration were facilitated, changes in course content, students' evaluation of the relevance of assignments and textbook, how practicum (clinical) sites met the course goals, course strengths and weaknesses, grade distribution, and attrition rate. During the nursing faculty May workshops aggregated results from course reports are used to inform decision-making about course and curricula performance improvement changes. Secondly, end of program SLOs are fully assessed in the DNP Capstone 2 course with completion of the student's practicum hours and the submission of a completed DNP project.

Thirdly, program outcomes will be assessed with each graduating class and consist of the following indicators; 1) graduate satisfaction, 2) employer satisfaction, 3) completion rates, 4) job placement rate, and 5) job placement in rural areas. Completion rates will be calculated yearly and if they fall below the expected level of achievement (ELA), the program admission, curriculum, and advisement processes will be reviewed. At one (1) year, surveys will be sent to graduates via their home email (which will be collected prior to graduation). The graduate survey will include items to elicit program satisfaction and job placement information. The job placement information will be used to send surveys to supervisors to gather employer satisfaction data. The ELAs for graduate and employer satisfaction are 90%. The ELA for job placement is 90% and the ELA for job placement in rural areas is 75% of those graduates who report having a job contract. (Characters 2,075)

Student Learning Assessment

Expected Student Learning Outcomes	Methods of/Criteria for Assessment
1. Applies nursing and interprofessional scientific and theoretical knowledge to improve healthcare services to patients, families, and populations with an emphasis on rural populations.	The DNP project will identify a specific process improvement needed for a population of patients or healthcare system and includes a graded section related to an interprofessional literature review and an applied theoretical background.
2. Uses leadership skills and competencies in healthcare systems to improve healthcare services to patients, families, and populations with an emphasis on rural populations.	The DNP students' projects will demonstrate process improvement for a population or healthcare system to improve services.
3. Synthesizes and disseminates evidence-based practices to improve healthcare services to patients, families, and populations with an emphasis on rural populations.	The DNP project will be evidence-based. The project will include a list and appraisal of current best evidence and a synthetization of findings and the appropriate application to the population or system being affected.
4. Utilizes information systems and technology to improve healthcare services to patients, families, and populations with an emphasis on rural populations.	The DNP student will be evaluated on the utilization of information systems by the following methods; 1) demonstrates adeptness in library searches for the DNP project, 2) accesses electronic data needed to complete the DNP project, and 3) practitioner students will record appropriate and complete patient data in the electronic patient data base electronically.
5. Demonstrates leadership and advocacy in facilitating positive healthcare change to improve healthcare services to patients, families, and populations with an emphasis on rural populations.	The DNP project goal is to establish a positive healthcare change for a population or system.
6. Employs effective interprofessional communication and collaboration to improve healthcare services to patients, families, and populations with an emphasis on rural populations.	The DNP student will demonstrate interprofessional communication and collaboration in one of two ways. First they will demonstrate these skills during their practicum hours by making the appropriate referrals for patients and securing services that meet patient needs. Secondly, the DNP project will demonstrate interprofessional communication and collaboration during the implementation stages as the student demonstrates leadership in process improvement.

7.	Implement systems changes that advocate healthcare prevention to improve healthcare services to patients, families, and populations with an emphasis on rural populations.	The DNP project will have a healthcare prevention component integrated into the project to address the chronic healthcare needs of the population being effected.
8.	Deliver advanced practice care in complex situations and systems to improve healthcare services to patients, families, and populations with an emphasis on rural populations (Adapted from the AACN *Essentials of Doctoral Education for Advanced Nursing Practice*, 2006).	The electronic documentation system used for practitioner practicums will demonstrate delivery of advanced care to patients and systems and will be reviewed continuously for completeness and appropriateness by DNP faculty.

Will the proposed program seek program-specific accreditation?

    X Yes

    ☐No

If yes, provide the institution's plans to seek accreditation, including the expected timeline for accreditation. (500 characters)

       The FMU DNP program will seek accreditation from the American Association of Colleges of Nursing's Commission on Collegiate Nursing Education (CCNE). A letter of intent will be sent in Fall of 2017 prior to admission of the first DNP class. The letter of intent will request an early onsite visit (appropriate for programs that are 12 months or less in length) for the Spring, 2019. The program's self-study will be completed in the fall of 2018 and mailed to the accreditation team for preparation of the onsite visit. (Characters 423)

Will the proposed program lead to licensure or certification?

    ☐Yes

    X No

If yes, explain how the program will prepare students for licensure or certification. (500 characters)

Teacher or School Professional Preparation Programs

Is the proposed program a teacher or school professional preparation program?
☐Yes

X No

If yes, complete the following components.

Area of Certification

Please attach a document addressing the South Carolina Department of Education Requirements and SPA or Other National Specialized and/or Professional Association Standards.

References

Auerbach, D. I. et al. (2014). *The DNP by 2015 A Study of the Institutional, Political, and Professional Issues that Facilitate or Impede Establishing a Post-Baccalaureate Doctor of Nursing Practice Program.* Retrieved from http://www.aacn.nche.edu/dnp/DNP-Study.pdf

AACN (2004). AACN Position Statement on the Practice Doctorate in Nursing October 2004. Retrieved from http://www.aacn.nche.edu/publications/position/DNPpositionstatement.pdf

AACN (2016). *The Doctor of Nursing Practice: Current Issues and Clarifying Recommendations Report from the Task Force on the Implementation of the DNP August 2015.* Retrieved from http://www.aacn.nche.edu/aacn-publications/white-papers/DNP-Implementation-TF-Report-8-15.pdf

Institute of Medicine (IOM) (2011). *The Future of Nursing: Focus on Education.* Retrieved from http://www.nationalacademies.org/hmd/Reports/2010/The-Future-of-Nursing-Leading-Change-Advancing-Health/Report-Brief-Education.aspx

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